

MINISTRY OF GENDER, CULTURE AND CHILDREN SERVICES

STATE DEPARTMENT FOR CHILDREN SERVICES





NATIONAL STANDARD OPERATING
PROCEDURES FOR SUPPORTIVE
SUPERVISION FOR CHILD PROTECTION
PRACTITIONERS



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ACRONYMS

CCAC County Children Advisory Committees

CTWWC Changing the Way We Care

GSSWA Global Social Service Practitioners Alliance

SCCAC Sub-County Children Advisory Committee

SCCO Sub-County Children's Officer

SDCS State Department for Children Services

SOP Standard Operating Procedures

GLOSSARY

Case management is the process of ensuring that an identified child has his/her needs for care, protection and support met. This is usually the responsibility of an allocated social worker who meets with the child, the family and any other caregivers and professionals involved with the child to assess, plan, deliver or refer the child and/or family for services, and monitor and review progress.¹

Case conference is a multi-disciplinary meeting consisting of child protection actors from different perspectives and disciplines who explore a child's/children's needs. A case conference can be called at the case planning, implementation or follow-up stage. Case conferences can be held at different levels including organisation, county and sub-county levels,² and are used to review service options across sectors and agencies to make formal decisions with the best interest of the child in mind.³

Child protection is the process of ensuring children are protected from all forms of harm through

structures and measures to prevent and respond to abuse, neglect, exploitation and violence, including putting into place the procedures necessary for handling situations or issues that may arise.⁴

Client is a person who uses or receives a service. A client can be a child or an adult.

Coaching is an attitude that places child protection practitioners as the drivers of their own development and encourages them to be experts at recognizing and overcoming their own strengths and challenges.

Competencies are the knowledge, skills, abilities and behaviours that contribute to individual and organisational performance.⁵

Continuing professional development is the improvement of knowledge to become more skilled and thus, competent, in performing one's duties.⁶

Protective factors are conditions or attributes (skills, strengths, resources, support or coping strategies) in individuals, families, communities, etc. that help people deal more effectively with stressful events and mitigate or eliminate risk.⁷

¹ Child Protection Practitioner's Guidebook: Case Management for Reintegration of Children into Family or Community-Based Care. Retrieved from <a href="https://bettercarenetwork.org/library/principles-of-good-care-practices/leaving-alternative-care-and-reintegration/child-protection practitioner%E2%80%99s-guidebook-case-management-for-reintegration-of-children-into-family-or-community-based.
² Ibid.

³ Global Protection Cluster Child Protection, European Commission Humanitarian Aid, USAID. (2014). Interagency Guidelines for Case Management and Child Protection.

⁴ Ibid.

⁵ https://hr.nih.gov/about/faq/working-nih/competencies/what-are-competencies.

⁶ Department of Social Development in the Republic of South Africa (2012). Supervision framework for the social work profession in South Africa. Retrieved from: https://www.westerncape.gov.za/assets/departments/social-development/supervision framework for the social work profession in south africa 2012.pdf.

⁷ Ibid.

Rapport refers to a harmonious relationship.8

Referral is understood as the process of recognizing a risk or concern about a child or household, deciding that action needs to be taken and providing information about or referring the client to the identified service. Referrals include self-referral (e.g., calling a helpline) or a referral from a service provider to another service provider (e.g., a social worker referring a family to the health clinic for HIV testing).⁹

Reflective practice is the ability to think about one's own actions and experiences to continuously learn and develop. Supervisors can support supervisees in this process by asking open-ended questions.

Resilience is the ability to develop social competence despite exposure to severe stress/trauma/adversity. It involves the ability to manage adversity and change without jeopardizing future wellbeing.¹⁰

Risk has been defined as any influence that increases the probability of onset, progression to a more serious state, or maintenance of a problem condition.¹¹

Service provider is an individual employed or attached to a formal institution that provides professional care or services.

Social service practitioners refer to a broad range of governmental/non-governmental professionals and paraprofessionals who work with children, youth, adults, older persons, families and communities to ensure healthy development and wellbeing. Social service practitioners focus on preventative, responsive and promotive services (informed by the humanities and social sciences); indigenous knowledge; discipline-specific and interdisciplinary knowledge/skills; and ethical principles. Social service workers engage people, structures and organisations to facilitate access to needed services; alleviate poverty; challenge and reduce discrimination; promote social justice and human rights; and prevent/respond to violence, abuse, exploitation, neglect and family separation.¹²

Strengths-based approach refers to a way of working that includes engaging with others who view the wisdom, assets and knowledge of individuals, groups and communities as potential resources. This should be at the core of the competencies sought by paraprofessional social service workers.¹³

Supervisee is a person being supervised.

⁸ D. Hepworth, R, Rooney, G. Rooney, K. Strom-Gottfied and J. Larsen. (2010). Direct Social Work Practice: Theory and Skills. Brooks/Cole Cengage Learning: Belmont, CA.

⁹ 4Children (2017). Reference guide on referral mechanisms within OVC Programming.

¹⁰ USAID presentation. (2016, July).

¹¹ Taylor, V. & Triegaardt, J (2018). Social Welfare Policy in Africa 2018.

¹² Global Social Service Workforce Alliance (2019). Social Service Workforce Mapping Toolkit.

¹³ Global Social Service Workforce Alliance (February 2017), Paraprofessionals in the Social Service Workforce: Guiding Principles, Functions and Competencies. Second Edition.

Supervisor is someone who leads a group of employees to achieve desired results. In this document, "supervisor" is used in a broader sense as it encompasses all those staff, inclusive of managers, who supervise other staff.

Supportive supervision is a relationship that supports staff technical competence and practice, promotes wellbeing and enables effective/supportive monitoring of casework.¹⁴ Additionally, supervision in the social services is a supportive relationship. It is carried out in regular meetings that focus on accountability, wellbeing and skill development. Through regular contacts, the supervisor provides coaching and encourages the supervisee to critically reflect on their practice. The aim of supervision is to improve service to clients.¹⁵

Vulnerability refers to individual, family, community and societal characteristics that reduce children's ability to withstand adverse impact from violations of and threats to their rights. It is often specific to each person and to each situation as well as to geographic location and timing.¹⁶

Vulnerable children include children exposed to risk factors that may negatively impact their development, care and protection, and/or whose access to child-care and protection services is limited.

¹⁴ Interagency Child Protection Case Management, Supervision and Coaching Training (2018). The Alliance for Child Protection in Humanitarian Action, USAID.

¹⁵ Global Social Service Workforce Alliance Supervision Interest Group (2020): *Guidance manual on strengthening supervision for the social service workforce.*

¹⁶ The Alliance for Child Protection in Humanitarian Action (2021). Identifying and ranking risks and protective factors: A brief guide.

https://alliancecpha.org/en/system/tdf/library/attachments/identifying risk and protective factors a brief guide.pdf?file=1&type=nod e&id=44641.

FORWARD

The Standard Operating Procedures (SOP) for Supportive Supervision have been developed by the State Department for Children Services (SDCS) in collaboration with partners to enhance the quality of services offered to vulnerable children and those at risk. These SOPs aim to promote professional excellence and the psychosocial wellbeing of child protection practitioners, acknowledging the critical importance of mental and emotional health in job performance.

These SOPs provide a structured and consistent approach to supportive supervision, which focuses on the emotional and psychological wellbeing of staff. This, in turn, improves service quality and fosters professional development.

Supportive supervision is essential for maintaining a high-functioning, ethical and effective child protection system. It offers emotional and psychological support to staff, helping them to manage the stress and emotional toll associated with child protection work. This leads to a more resilient and motivated workforce, ultimately resulting in better outcomes for children and families.

The SOPs outline various supervision practices such as individual and group supervision sessions, observation, shadowing and case discussions. They also include tools, and a schedule embedded within the document to facilitate these supervision practices. The goal is to create a safe and supportive environment that allows staff to reflect on their practices, receive constructive feedback and continuously improve their skills and knowledge.

Overall, the SOPs for Supportive Supervision are a vital resource for child protection practitioners. They promote the wellbeing and professional growth of staff while ensuring the delivery of high-quality services. By fostering a culture of accountability, transparency and continuous improvement, these SOPs contribute to better outcomes for vulnerable children and their families.

Hon. Hannah Wendot Cheptumo

Cabinet Secretary

Ministry of Gender, Culture and Children Services

PREFACE

Child protection practitioners often work under incredibly demanding conditions, managing complex cases that can directly or indirectly affect their wellbeing. Those in the public sector frequently handle high caseloads while also engaging in group and community work, all amidst significant administrative responsibilities. The constantly changing social, political and health contexts—intensified by globalization and technological advances—add further challenges to their work. As a result, these practitioners frequently experience work-related stress and pressure, compounded by their own emotional, psychological and personal challenges.

To enhance the quality of services within the child protection workforce and address these challenges, the State Department for Children Welfare Services, in collaboration with partners, has developed *Standard Operating Procedures (SOP)* for Supportive Supervision. These SOPs aim to promote both professional excellence and the psychosocial wellbeing of child protection practitioners, recognizing the critical role of mental and emotional health in professional performance.

The SOPs are guided by several key objectives, including a structured support system, performance enhancement, clarity and consistency, defined roles and responsibilities, knowledge transfer, and continuous improvement. Additionally, the SOPs emphasize the importance of community engagement, robust coordination mechanisms and the integration of the child protection workforce across various sectors.

Therefore, I believe that these SOPs will serve as an invaluable tool for all professionals working in the field of child protection.

CPA Carren Ageng'o Principal Secretary

State Department for Children Services

ACKNOWLEDGEMENT

The development of these Standard Operating Procedures (SOP) was a collaborative effort, made possible by the dedication and expertise of a committed team. This process brought together stakeholders from diverse backgrounds whose valuable insights and professional knowledge helped shape the final document.

I would like to express my sincere gratitude to the Kenyan government agencies that played a leading role in this initiative. In particular, I would like to extend special thanks to the Directorate of Children Services—Alternative Family Care Department—for providing technical personnel, overseeing the development process and skilfully coordinating the contributions of various stakeholders.

I also want to acknowledge the invaluable input and participation of the National Council for Children Services, the Directorate of Social Development, the National Council for Persons with Disabilities and the Directorate of Social Assistance. Their collective efforts significantly enhanced the quality and relevance of this document.

I am especially grateful to the non-State actors—Child in Family Focus-Kenya (CFFK), SOS Children's Villages Kenya (SOS CV KE), World Vision Kenya. And Hope and Homes—for generously sharing their experiences, which enriched this work.

Finally, I would like to express my deep appreciation for the Changing the Way We Care (CTWWC) initiative for their generous financial and technical support. Their contributions were pivotal to the successful development of this document.

This document stands as a testament to the power of collaboration and shared purpose. We hope that these SOPs will serve as a practical tool and guiding framework for advancing the care and protection of vulnerable children across Kenya. We remain committed to fostering partnerships that prioritise the best interests of children and to building systems that uphold dignity, inclusion and wellbeing for all.

I encourage all government personnel, civil society organisations, faith-based organisations, and charitable and statutory children's institutions to adopt and utilize these essential SOPs to enhance the professional capacity and emotional well-being of all child protection practitioners.

Shem Nyakutu

Secretary Children's Services

I. BACKGROUND

The State Department for Children Services (SDCS), in accordance with Part IV of the Children Act, ¹⁷ along with other legislation, policies, guidelines and regulations, has 11 mandates under its jurisdiction. The State Department operates across eight regions, 47 counties, 290 constituencies and 353 sub-counties. It also manages 30 statutory children's institutions, which include five rescue centers, 14 remand homes, two reception and classification centers, and nine rehabilitation schools.

In Kenya, child protection practitioners engage in promotive, preventive, responsive and rehabilitative activities, yet sometimes, they may lack necessary technical competencies. The job may be stressful due to the traumatic nature of some of the cases and high caseloads, which calls for institutionalised mechanisms to empower practitioners to manage their emotional wellbeing.

Supervision for child protection practitioners supports them to improve performance, while enhancing the organisation's work and providing quality assurance for the targeted service users. The Global Social Service Practitioners Alliance (GSSWA) states: "Supervision in the social services is a supportive relationship. It is carried out in regular meetings, which focus on accountability, wellbeing and skill development. Through regular contacts, the supervisor provides coaching and encourages the supervisee to reflect on their practice critically. The aim of supervision is to improve the service to clients."

Supportive supervision provides a structured and consistent approach that addresses the above challenges through supervision that improves the quality of oversight and supports the practitioners. Supportive supervision serves a critical role in ensuring the quality of services provided to vulnerable children. Thus, effective supervision is one of the most important elements in enhancing service delivery in child protection, reducing attrition of practitioners, boosting the professional career prospects of child protection practitioners, and enhancing resilience and satisfaction with their work.

Purpose of the Standard Operating Procedures

The purpose of these Standard Operating Procedures (SOP) is to enhance the quality of services provided by the child protection practitioners who work with vulnerable children and those at risk. It outlines a structured and consistent approach to supportive supervision, which aims to improve the emotional and psychological wellbeing of staff members.

Vision

To promote quality services for children through a collaborative and empowering work environment.

¹⁷ Government of Kenya (GoK) (2022). Children Act No 29 of 2022. Retrieved from: https://kenyalaw.org/kl/fileadmin/pdfdownloads/Acts/2022/TheChildrenAct 2022.pdf.

Mission

To build a strong child protection workforce, we will implement supportive supervision that promotes accountability, continuous learning and staff wellbeing, leading to improved service delivery and better outcomes for children and families.

Objectives

Overall objective: To improve the professional learning and development of child protection practitioners, enhancing their knowledge, skills and competencies for effective service delivery.

Specific objectives:

- To create a structured framework for supportive supervision specifically for SDCS child protection workers.
- To enhance the ability of both supervisors and their teams to identify strengths, address
 performance gaps and ensure compliance with the required standards and procedures for
 delivering quality services at all levels.

Rationale

Supportive supervision is globally recognised as a standard requirement in professional social work practice and thus, fundamental for effective social service delivery. Despite this, the SDCS currently operates without formal **SOPs** for supportive supervision. This gap has significant implications for practitioners' wellbeing, service quality and ongoing professional development.

Child protection practitioners and other social service workers often face demanding and complex work environments. SDCS child protection practitioners engage in promotive, preventive, responsive and rehabilitative activities in stressful and complex environments. Due to the traumatic nature of some of the cases they are engaged in, high caseloads and administrative challenges, including inadequate resources, staff may experience secondary traumatic stress, compassion fatigue and burnout. All these issues can compromise the wellbeing of practitioners, and the quality of care provided to children and families.

Establishing an SOP framework on supportive supervision within SDCS is both urgent and essential. It is a vital step towards improving staff wellbeing, promoting professionalism and the delivery of high-quality child protection services, resulting in improved outcomes for children and families.

Significance of supportive supervision for child protection practitioners

Evidence shows that formal one-on-one supervision helps protect children¹⁸ and includes additional positive outcomes. Supportive supervision is needed in the SDCS for the following reasons:¹⁹

- Develop and refine workers' knowledge, skills, attitudes, experiences and ethical orientation.
- Create a reflective space and provide a critical opportunity to monitor actual client interactions, review professional aspirations and challenge both oneself and supervisees.²⁰
- Provide the necessary guidance and backing to navigate the complexities that come with child protection practitioners' tasks, enhancing staff confidence and self-esteem.
- Facilitate critical reflection on values, judgments, ethical dilemmas and decision-making in child protection practice, promoting evidence-informed, culturally competent practice.²¹
- Help child protection practitioners recognise the likely sources and impact of risk while in service, and to guard their safety.
- Facilitate higher levels of job satisfaction, lower burnout rates, reduce staff turnover and enhance retention.²²
- Provide guidance and enhance the quality of work for both supervisors and supervisees and ultimately, the client.
- Protect clients and child protection practitioners and ensure that professional standards and quality services are delivered by competent workers.
- Effectively support supervisees.
- Provide supervisors with the opportunity to examine and reflect on the ethics of their practice.

Intended audience

These SOPs for supportive supervision are designed for all professional and paraprofessional workers who serve children in Kenya. Like the medical profession, which includes doctors, nurses, physical therapists and technicians, the children's workforce consists of various individuals with different titles, roles and functions. Despite these differences, they share a common goal: to protect, care for, support, promote and empower vulnerable children.

¹⁸ Brandon, et. al., as quoted in Interagency Child Protection Case Management, Supervision and Coaching Training (2018).

¹⁹ Adapted from: GSSWA (2020). Guidance manual on strengthening supervision for the social service workforce. Retrieved from: https://www.socialserviceworkforce.org/system/files/resource/files/Guidance Manual Strengthening Supervision Social Service Workforce_0.pdf.

²⁰ GSSWA (2020). Guidance manual on strengthening supervision for the social service workforce. Retrieved from: https://www.socialserviceworkforce.org/system/files/resource/files/Guidance Manual Strengthening Supervision Social Service Workforce 0.pdf.

²¹ Government of Malawi (2021). Guide for supportive supervision for child protection workers. Retrieved from: https://www.unicef.org/malawi/media/6016/file/Guide%20for%20supportive%20supervision%20-%20For%20child%20protection%20workers.pdf.

²² J. Carpenter, C. Webb, L. Bostock and C. Coomber (2015): *Effective supervision in social work and social care*. Social care institute for excellence (SCIE), research briefing No 43.

Child protection practitioners include both paid and unpaid individuals, as well as governmental and non-governmental professionals and paraprofessionals, all working to ensure the healthy development and wellbeing of children.

II. SUPPORTIVE SUPERVISION

2.1 Definition

Supportive supervision is a relationship that supports the supervisee's technical competence and practice, promotes wellbeing and enables effective/supportive monitoring of work.²³ Supportive supervision is an accountable two-way process, i.e., it promotes self-awareness and can assist in motivating supervisees and enabling the development of overall good practice in child protection and social work sectors.

Supportive supervision is vital for an effective child protection system within SDCS. It provides emotional and psychological support to staff, helping them cope with the stress of their work, which fosters a resilient and motivated workforce. By promoting continuous professional development and reflective practices, supportive supervision enhances staff skills, encourages career growth, increases job satisfaction and retention, and drives innovation in child protection strategies, ultimately improving the quality of services for children and families.

Regular supervision helps maintain adherence to ethical standards and guidelines, ensuring that all actions taken by staff are in the best interests of the children and families they serve. It creates a structured environment where staff can discuss challenges and successes, fostering a culture of accountability and transparency.

Supportive supervision is vital for fostering a positive organisational culture. It encourages open dialogue, active listening and a safe environment for staff to discuss challenges without fear of repercussions. Effective supervisors model core values like collaboration, respect and continuous improvement, reinforcing the desired culture during times of change. Their supportive practices also help facilitate the adoption of new values and practices associated with change initiatives.²⁴

Supportive supervision is not:25

- Routine management functions, e.g., allocating workload or authorizing holidays/leave.
- Disciplinary processes, rather it creates a confidential space in which the supervisee is helped to think reflectively and critically about their practice.

²³ The Alliance for Child Protection in Humanitarian Action (2018): Interagency Child Protection Case Management, Supervision and Coaching Training.

²⁴ Government of Malawi (2021). Guide for supportive supervision for child protection workers. Retrieved from: https://www.unicef.org/malawi/media/6016/file/Guide%20for%20supportive%20supervision%20-%20For%20child%20protection%20workers.pdf.

²⁵ Global Social Service Workforce Alliance Supervision Interest Group (2020). Guidance manual on strengthening supervision for the social service workforce.

Counselling, however, it is quite possible that during a supervision process, a supervisee
might disclose difficult personal circumstances, and it may be appropriate for the supervisor
to refer staff to appropriate services (but not to provide counselling themselves).

An immediate supervisor is often the person providing professional supervision. However, supportive supervision is distinct from standard line management function. If the supervisor is providing both roles, professional supervision should be treated as a specific task with its own conditions. Due to this differentiation, some organisations can have two different people play these different roles.

Table 1: The Difference Between Performance Supervision & Supportive Supervision

Performance Supervision	Supportive Supervision
The supervisor is a fault finder, bossy, authoritative, policing and directive.	The supervisor focuses on improving performance and building relationships. The supervisor is more of a mentor/coach who provides support and direction to foster personal growth and excellence.
There is little or no follow-up.	It involves regular follow-up.
It reviews task compliance.	It focuses on improving performance, building relationships and processes.
Punitive actions are intended.	Only support is provided.
It has routine timelines.	Although planned, it is also flexible.

2.2 Functions of supportive supervision

Effective supportive supervision provides a conducive environment for staff to reflect on their practice, as well as develop skills and knowledge. Good and effective supervision is associated with greater job satisfaction, organisational commitment and job retention. Table 2 shows **three main functions** of supervision. For the SDCS staff to provide quality services to vulnerable children, all three functions of supervision must be provided, as highlighted in Table 2.

Table 2: Functions of Supervision²⁶

Function	Purpose	Tasks
Managerial/ Accountability and Administrative	Ensure competent, accountable practice of staff	 Human resources. Compliance with administrative rules, regulations and procedures. Plan and assign work. Coordinate with other actors. Documentation and reporting. Material and logistical support. Reinforce safety and ethical standards. Review caseloads. Advocate for staff to have the resources and materials to do their jobs effectively (phones, computers, transport, etc.). Help supervisees understand their roles, responsibilities, and workload.
2. Educational and Professional Development	Ensure staff are continually updating their knowledge and skills, applying them to their daily work and reflecting on their own practice	 Assess competencies. Collaborate on personal learning plans. Promote reflective practices. Reinforce guiding principles of child protection, social work and case management. Encourage self-awareness and perceptions. Help supervisees develop and improve their practice skills and knowledge. Provide continued up-skilling through coaching and practice advice. Help supervisees identify their preferred learning styles as well as barriers to learning and professional development; support them to reflect on learning opportunities. Help supervises gain access to additional training according to individualized professional development plans and ensure they know how to apply the learning in practice.
3. Supportive	Ensure emotional and psychological wellbeing of staff and team, decrease burnout, increase performance	 Create a safe space for reflection. Promote self-care. Have empathy and normalize feelings. Reinforce realistic expectations and healthy boundaries. Promote recognition and encouragement. Support social service practitioners' wellbeing and ensure that the organisation has the right supports in place to address any issues.

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²⁶ The Alliance for Child Protection in Humanitarian Action (2018); <u>Mwendo supportive supervision job aid</u>; Global Social Service Alliance Supervision Interest Group (2020), *Guidance manual on strengthening supervision for the social service*.

Balance of functions

For SDCS staff to provide quality services to vulnerable children, all three functions of supervision must be provided. These are highlighted in Figure 1, below. The role of consistent, quality supportive supervision directly relates to positive outcomes for children.

In recent years, **a fourth function** has emerged and is also considered important to supervision. This function is **mediation**, **which** is described as:²⁷

Reviewing workloads in detail according to agency policies and procedures, giving feedback on performance and helping workers reflect on their strengths and weaknesses.

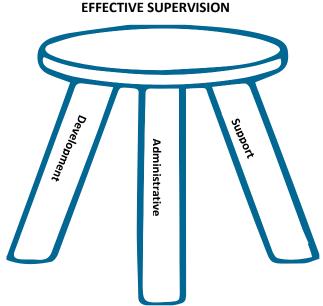


Figure 1: Three-legged stool of components of supportive supervision.

- Supporting supervisees to undertake work they find difficult and encouraging them to take on new challenges.
- Helping supervisees understand their roles, responsibilities and workload.
- Advocating for staff to have the resources and materials to do their jobs effectively (phones, computers, transport and many others).

Supervision is a protective practice if:

- Children remain at the center of the supervision process.
- It protects children and families from staff who have inadequate experience and are not prepared to work directly with certain children and families that may be discriminated against, e.g., those affected by or living with HIV, disabilities, etc.
- It protects staff from making mistakes, burnout or over-/under-involving themselves, which may cause harm to children.
- Processes are designed in such a way that staff are encouraged and supported.
- A culture of openness, transparency and reflection is fostered for child protection practitioners, which will result in better outcomes for children.

²⁷Global Social Service Workforce Alliance Supervision Interest Group (2020). Guidance manual on strengthening supervision for the social service workforce.

2.3. Practice of Supportive Supervision

Settings or models of supportive supervision

There are various models of supervision, and supervision can take place in various settings (e.g., face to face, over the phone, individually or in a group setting, etc.).

Supportive supervision settings

Three types of supervision settings typically occur and are described below.

- 1. **One-on-one supervision:** These are routine or regularly scheduled sessions between the supervisee and supervisor.
- 2. **Group supervision:** These are routine or regularly scheduled group sessions between the supervisor and the staff team.
- 3. Ad-hoc supervision: This type of supervision is responsive to the immediate needs of staff; briefly discusses one issue or crisis; is generally unplanned but maintains privacy and confidentiality; and is helpful when there is a need for immediate advice or consultation. It is important to note that ad-hoc supervision is not a substitute for individual or group formal/structured supervision.

Supervision settings 1 and 2 focus on formal and structured supervision, but urgent situations in child protection may require ad-hoc supervision. Ad-hoc supervision should not replace formal individual or group supervision, with one-on-one being the preferred method.

Types of supervision activities

Table 3 highlights the seven types of supervision activities and whether they occur in individual or group settings.

Supervision activities	Individual	Group
Individual supervision session	Х	
Group supervision meeting		X
Observation	Х	
Shadowing	Х	
Case discussion	Х	X
Capacity assessment	Х	
Case review	Х	

Supportive supervision is collaborative, requiring both supervisors and supervisees to prepare, engage and follow up. Supervisors actively participate in three functions of supervision, focusing on building staff knowledge and skills while providing support, direction and encouraging reflection.

The supervisor can be different than the line manager. The following are important to consider when implementing supportive supervision.²⁸

- Be regular and consistent.
- Be collaborative.
- Be safe and confidential.
- Recognise it as an opportunity for learning and professional growth.
- Include the necessary knowledge and skill to supervise or consult appropriately and only within the supervisor's areas of knowledge and competence.
- Establish clear, appropriate, cultural- and gender-sensitive boundaries.
- Do not engage in any dual or multiple relationships with supervisees in which there is a risk
 of exploitation of or potential harm to the supervisee.
- Evaluate supervisees' performances in a manner that is fair, non-judgmental and respectful.

Supportive supervision is part of ensuring effective and accountable services for vulnerable children and their families or caregivers that ultimately improve overall outcomes for children. Documenting supervision is an essential task that helps the supervisor maintain a record of the process. It allows for the identification of trends and areas needing improvement, provides a record of decisions made and helps both the supervisor and supervisee track progress effectively.

2.4. Key competencies

Competencies encompass skills, knowledge and attitudes or behaviours. There are essential competencies regarded as best practices for supervisors to provide effective supportive supervision, as explained below.

2.4.1 Active listening and communication

Active listening helps supervisors build trust with supervisees and is essential for supportive supervision. It involves paying attention to verbal and nonverbal cues, asking appropriate questions and using techniques like rephrasing, reframing, reflecting and summarizing.

As a supervisor, it is important to encourage supervisees to think of options first, rather than offering immediate solutions. Thus, supervisors should:

Demonstrate empathy for the supervisee's challenges and concerns.

²⁸ Adapted from the National Association of Social Workers (NASW), Interagency case management guidelines, Interagency Child Protection Case Management, Supervision and Coaching Training (2018). The Alliance for Child Protection in Humanitarian Action, USAID.

- Work from a strengths-based perspective, being sure to highlight what you think the supervisee did well and ask her/him what s/he thinks could have been done differently before you share feedback.
- Seek to empower the supervisee by asking her/him to problemsolve instead of immediately providing solutions.
- Help supervisees become comfortable with uncertainty.

The supervisor should share reflections respectfully, using active listening and thoughtful questions. This approach allows supervisees to reflect on their performance, draw conclusions and make decisions for improvement.

Failure to give constructive feedback may result in:

- No change in the supervisee's behavior.
- The supervisee continuing to be unaware of the issue.
- Future confrontation.
- Increased tension that can build and ultimately lead to conflict.
- Problems in the supervisor/supervisee relationship or within the team.
- Potential harm to children or families (in the most extreme cases).

Helpful strategies (Do's) include listening to supervisees, identifying and clarifying stressful issues, encouraging the expression of emotions and helping supervisees name and release emotions, identifying positives, modifying inappropriate expectations and reframing stressful events.

Unhelpful strategies (Don'ts) are denial, avoiding discussing difficult issues, minimizing what they are experiencing and feeling, insisting that things will get better and blaming the supervisee by making them feel responsible for the situation.

2.4.2 Problem-solving & conflict resolution

Supervisors face challenges and conflicts in the workplace. They must analyze problems, develop solutions and make decisions that benefit both the supervisee and the organisation. A good supervisor handles conflicts diplomatically, facilitates discussions and seeks mutually acceptable resolutions.

2.4.3 Coaching

Coaching is both a method and an attitude, representing a way of being supported. It involves "coming alongside" the child protection practitioner to support them in developing specific skills and modelling effective practices. Ultimately, coaching is an attitude that empowers the child protection practitioner to take charge of their own development and to recognise and address their strengths and challenges.

In the supervisor role as a coach, the aim is to use specific techniques to help the child protection practitioner identify their strengths and challenges, as well as to assist in setting and achieving realistic goals.

Reflective practice aims to help supervisees assess their actions and experiences for continuous learning and development. Coaching supports this process to enhance practice and outcomes for children. Handling cases with child protection concerns requires strong interpersonal skills and self-awareness to prevent potential harm.

Supervisors do not always need to have perfect answers or solutions. Supportive supervision is a **process**, and each case can present new challenges and complexities. Supervisors need to **facilitate conversations** with supervisees **and build trust** between one other to enable them to confidently apply ethical standards in practice.

2.4.5 Provide feedback to supervisees

Feedback involves sharing observations about a supervisee's skills and behaviours to promote improvement and positive change for children. It is an essential component of supportive supervision and should be delivered with skill and sensitivity. Effective feedback highlights both strengths and weaknesses, clarifies key issues, enhances self-awareness and encourages development. Ongoing positive and constructive feedback is vital for a productive supervisor/supervisee relationship.

- Give feedback sooner rather than later, otherwise, issues can build and intensify.
- Feedback should be provided after the session.
- Be clear in advance on what you want to say and select priority areas.
- Acknowledge strengths and good work.
- Be clear and specific; talk about and describe specific behaviours, giving examples where possible.
- Don't make assumptions about motives; always be curious and listen.
- When giving constructive feedback, brainstorm alternatives together with supervisee.
- Offer strategies or opportunities to improve.

2.4.6 Applying knowledge of the guiding principles

Supportive supervision involves understanding child protection principles and social work practices, along with the skills to apply them in various settings. Supervisors don't need to have all the answers; it is a reflective learning process where each case brings unique challenges.

2.4.7 Facilitation

Supervisors are responsible for three major tasks in individual and group facilitation, and it is important to find a balance among them. These tasks include:

- 1. *Content*—Agreement on the goals/priorities of the meeting.
- 2. *Process*—Facilitating productive participation from diverse individuals to achieve a common outcome.
- 3. Relationships—How the team interacts with each other and the supervisor.

One should be able to

- Create an open, inclusive environment.
- Encourage participation and contributions.
- Set guidelines.
- Give clear instructions.
- Use active listening and clear communication.
- Manage time.
- Be flexible and able to adapt quickly.
- Recognise and respond to signs of stress and burnout in supervisees.
- Support supervisees in exploring ways to manage stress.

- Set realistic expectations of the team.
- Promote staff member safety.
- Promote respectful and effective communication within the teams.
- Empower and encourage supervisees.
- Acknowledge and validate the experience of supervisees.
- Be a role model for the team.
- Promote a team atmosphere and consider buddy systems.

Note: Supervision skills take time and practice—and can constantly be developed and improved through reflection.

2.4.8 Emotional Intelligence

Emotional intelligence involves recognizing, understanding and managing emotions in oneself and others. By enhancing this skill, child protection practitioners can strengthen client relationships, make better decisions and foster empathy, ultimately improving outcomes for children, families and communities.

Key components of emotional intelligence include:

- Self-awareness: Recognizing and understanding one's own emotions.
- Self-management: Controlling and adapting emotional responses.
- Social awareness: Understanding and empathizing with others' emotions.
- Relationship management: Building and maintaining strong, effective relationships.

2.4.9 Empathy

Understanding and empathy towards team members are important for supportive supervision. A good supervisor cares about their team's well-being, recognises their individual strengths and challenges, and supports them accordingly. Demonstrate empathy for the supervisee's challenges and concerns.

2.4.10 Cultural competence

Cultural competence in child protection and social work involves effectively responding to individuals from diverse cultures, languages, races, and backgrounds, recognizing their worth and dignity. In Kenya, cultural competence within supportive supervision is vital for fostering effective

communication and inclusive environments, ultimately enhancing the quality of child protection services.²⁹

- Uphold ethical standards in social work that emphasize respect for diversity and the promotion of social justice.
- Encourage both supervisors and supervisees to engage in ongoing self-reflection and examination of their own biases and assumptions.
- Equip supervisees with the skills and knowledge to effectively and ethically navigate complex cultural situations with the children, families and communities they work with.
- Allow supervisors to communicate more effectively with supervisees from diverse backgrounds, which is essential for providing meaningful guidance and support.
- Enable supervisors to create a supportive space where supervisees feel respected, valued and understood regardless of their cultural background. This promotes openness, trust and engagement in supervisory relationships.

2.4.11 Leadership

A good supervisor provides direction, sets clear goals and motivates their team to achieve them. They lead by example and inspire others to perform at their best. Key supervisor leadership competencies for supportive supervision include the following.

Decision-making: Good supervisors make timely and well-informed decisions. They weigh options carefully, consider the impact on their team and take responsibility for their choices.

Delegation: This is key to effective supervision. Supervisors should know how to assign tasks based on team members' strengths, monitor progress and provide support when needed.

Time management: Supervisors often juggle multiple responsibilities. They should prioritise tasks effectively, manage their time well and help their team members do the same.

Team building: Building a cohesive team is essential for productivity and morale. A good supervisor fosters collaboration, encourages teamwork and celebrates milestones together.

Ethical behavior: Integrity and ethical conduct are fundamental for supervisors. They lead with honesty, fairness and respect for their team members and the organisation's values.

²⁹ Adapted from: Attipoe, H. (2024). A cultural practice guide for human services and the helping professions. International Journal of Social Work Vol 11. No 1. 2024. Retrieved from:

https://www.researchgate.net/publication/378192011 Cultural Competency A Cardinal Force in Social Work Practice and Service-A_Cultural_Practice_Guide_for_Human_Services_and_the_Helping_Professions NASW (2015). Standards and indicators for cultural competence in social work practice. Retrieved from: https://www.socialworkers.org/Practice/NASW-Practice-Standards-Guidelines/Standards-and-Indicators-for-Cultural-Competence-in-Social-Work-Practice; Eible, L. (2015). Social work supervision through a relational-cultural theoretical lense. Retrieved from: https://repository.upenn.edu/server/api/core/bitstreams/6bd1105b-71f4-4e31-8789-865cf8b8d666/content; Robinson, A. (2023). Embracing diversity and cultural competence in clinical supervision. Retrieved from: https://www.tworiverstherapycolorado.com/blog/embracing-diversity-and-cultural-competence-in-clinical-supervision.

Adaptability: The ability to adapt to changes in the workplace environment is crucial. Good supervisors remain flexible, resilient, and open to new ideas and approaches.

By possessing these competencies, a good supervisor can create a positive work environment, foster productivity and contribute to the overall success of their team and organisation.

III. STANDARD OPERATING PROCEDURES

3.1. SOPs for individual supportive supervision session

What: These are regular one-on-one sessions between the supervisor and the supervisee. The session can be conducted physically or virtually.

Who: Both parties are responsible for preparing and contributing to the session, with the supervisor taking the lead role.

Why: Individual supportive supervision provides an environment of openness where supervisees are encouraged to reflect honestly.

How: The supervision session addresses all three functions of supervision, including administrative, educational/developmental and supportive. At a minimum, the frequency of the individual sessions should be held once a month.

The sessions should be scheduled in advance. A prepared and clear agenda makes it easier to enforce boundaries and uphold the quality of the supervision.

Both supervisor and supervisee should come prepared for the meeting. Both are responsible for preparing information to share based on monthly activities and any pre-determined topics. This can include cases, questions from the supervisee, and feedback or guidance from the supervisor.

Tools: The Individual Supervision Form (SS Form 1) should be used by a supervisor to track progress made by the supervisee over the course of each period. This tool assists the supervisor in facilitating a constructive dialogue with the supervisee to realize the objective of supervision.

3.1.1 Purpose of individual supervision session

The individual supervision session should:

- Offer guidance, constructive feedback and monitoring.
- Challenge practices that are considered unethical or risky, as well as personal and professional blind spots.
- Identify and minimize work overload on the supervisee.
- Provide direction regarding goals, priorities and next steps in a case, particularly in complex cases.
- Empower the supervisee to find and propose creative solutions to challenges.
- Identify any cases that need higher-level or urgent support and ensure that necessary actions are taken.
- Identify potential stress levels and guide the supervisee on self-care and stress management.
- Support the supervisee in increasing their professional knowledge and skills.
- Provide guidance on time management strategies for equitable distribution of time for cases.

 Provide an avenue for the supervisee to establish clear and realistic workload expectations.

3.1.2 The role of a supervisor in individual supportive supervision

A supervisor should:

- Prepare for supervision sessions in advance and jointly create an agenda with the supervisee.
- Review notes from the previous individual supervision record and note areas for follow-up.
- Ensure the meeting is in a conducive space to ensure confidentiality without interruptions.
- Allocate sufficient time in line with the agenda and structure the session.
- Follow up on the agreed-upon areas of action from the session for both the supervisor and the supervisee.

When providing supportive supervision, the supervisor should take into consideration the following elements:

- Supportive supervision can help reduce stress and anxiety of the supervisee by demonstrating that decisions on work and caseloads are fair and equitable, and that appropriate support is always provided in complex or urgent cases.
- Inadequate information, poorly informed or unexplained decisions, and/or lack of support with complex cases can cause professional anxiety and heighten the risk of burnout.
- Supervisees should never be left without support to manage tasks that are beyond their capacity and training. A supervisor must provide support or seek support from a higher level for complex cases and any case that stretches a supervisee beyond their proven capacity and level of training.

Note: Follow-up should be done to ensure that the supervisee has opportunities to apply these new skills at work and to share with colleagues.

3.1.3 The role of the supervisee in individual supportive supervision

The supervisee should:

- Participate in drawing the agenda for supervision meetings with the supervisor.
- Assemble the required materials and documentation (e.g., case files, among others) for the supervision sessions to support reflective learning.
- Seek clarification if needed; engage proactively to seek solutions and support when the need arises.
- Inform the supervisor of any psychosocial, security or safety challenges that may arise in the course of their work.
- Share openly about the total work effort required by the current work and caseload.
- Review and reflect on the current workload.
- Identify learning and development needs.

3.1.4 Workload management

Supervision plays a vital role in ensuring manageable workloads and helps supervisees identify which tasks need immediate attention. It supports them in organising their schedules to prevent burnout,

especially when dealing with emotionally challenging cases. Supervisees should grasp the core principles of their work with children and families, focusing on child protection. The supervisor's role is to aid the supervisee in enhancing their knowledge and practice.

3.2. SOP for group supervision meetings

What: Group supervision consists of scheduled sessions between a supervisor and a team of supervisees. Group supervision should not replace individual supervision and should have one lead supervisor or a designated team lead among multiple supervisors.

Who: The supervisor and supervisees share responsibility for preparing for and contributing to sessions, with the supervisor leading.

Why: These sessions focus on addressing work-related challenges, sharing experiences and receiving guidance. The meetings provide a collaborative opportunity to identify and address the administrative, developmental and supportive needs in a manner that facilitates the discussion.

How: The supervision session addresses all three functions of supervision, including administrative, educational/developmental and supportive. Group supervision meetings should occur quarterly for 1–1.5 hours, scheduled in advance to collaboratively

Peer case conferencing as a tool for supportive supervision is useful when there is a particularly difficult case or a successful case. In either situation, the case conference format is used, but only involves supervisees and the supervisor or facilitator of the meeting.

It is primarily peer support and is an opportunity for supervisees to present cases after which their peers discuss the successes and challenges, as well as help identify innovative approaches, solutions and/or lessons learned. It is primarily peer support and is an opportunity for supervisees to present cases after which their peers discuss the successes and challenges, as well as help identify innovative approaches, solutions and/or lessons learnt.

The supervisor is typically a facilitator of the case conference while the supervisees lead the discussion and learn from one another.

This type of case conference forum is a good tool to use when hosting monthly meetings with supervisees.

address administrative, developmental and supportive needs. Group supervision meetings must prioritise confidentiality. Supervisees should share challenging cases and approaches while avoiding identifying details, adhering to the "need to know" principle. Discussions should not continue outside the group after sessions to maintain boundaries and prevent leaks. Proper documentation and secure storage of information are essential to safeguard against breaches.

Tools: The Group Supervision Form (SS Form 2) is a tool that provides an overview of key steps for holding an effective group supervision meeting.

3.2.1. Purpose of group supervision

The purpose of group supervision is to:

- Provide a safe and supportive environment by ensuring that the group feels safe sharing their experiences. Supervision sessions should be non-competitive, nonjudgmental and supportive.
- Offer guidance, constructive feedback and monitoring.

- Provide direction regarding work goals and priorities.
- Discuss and guide particularly complex cases.
- Empower supervisees to increase their knowledge and skills.
- Guide strategies to organise and manage the supervisee's work.
- Identify potential stress levels.

3.2.2. Role of supervisor in group supervision

The role of the supervisor in group supervision is to:

- Consult and determine what should be discussed in a group supervision meeting.
- Prepare and share the agenda.
- Review the notes from the last meeting in the meeting record and note areas for follow-up.
- Manage the time and structure of the meetings.
- Provide an opportunity for all members to actively participate in group supervision meetings.
- Offer guidance, constructive feedback and monitoring.

3.2.3. Role of supervisee in group supervision meetings

The role of the supervisee in group meetings is to:

- Participate in scheduled and regular group supervision meetings with the supervisor.
- Participate in case conferencing and other meetings.
- Respect and support other supervisees.
- Maintain confidentiality.
- Inform the supervisor of any urgent/emergency needs that arise in the case.
- Seek and provide peer support with other supervisees related to caseload management.
- Use group supervision meetings to review and reflect on the current workload.
- Ensure that all documentation is in the file.

Note: Group supervision can also take the form of peer group supervision.

Peer group supervision³⁰ involves staff with similar skills meeting regularly to discuss professional challenges, new interventions, ethical dilemmas and case management. It addresses the lack of consistent individual supervision and provides peer support alongside individual sessions. A facilitator for the peer group supervision meeting should be appointed to ensure that the sessions take place. A clear agenda makes it easier to enforce boundaries and uphold the quality of supervision.

Critical reflection is essential, allowing all group members to offer positive feedback and constructive challenges. Support among members should focus on enhancing each individual's reflective abilities. Each session should concentrate on one supervisee's needs without diverging into another's issues.

At the end of each session, there should be no further discussion of the issue, inside or outside the group. This rule establishes boundaries and prevents supervision material from leaking elsewhere.

3.3 SOPs for observation

What: This is a supervision practice used to assess a supervisee's application of their competencies, skills, knowledge, behaviour and attitudes in the execution of their duties. It can also be used if a supervisee has a complex assignment or relationship with a client/child and the supervisor needs to observe their interaction.

Who: The supervisor attends a face-to-face interaction with a supervisee while the supervisee is carrying out his or her work duties.

Why: The purpose is to observe a supervisee's skills, knowledge, attitude and behaviour to provide feedback in individual sessions.

How: During the observation, a supervisee conducts their work as though the supervisor is not present. The supervisor is a neutral observer during this session unless it is essential to intervene. A supervisor should only interrupt a session if a work ethic or code of conduct is being violated or if the supervisee explicitly asks for support or feedback.

Tool: The Observation Form (SS Form 3) should be used by supervisors as a guide for observing service provision. This tool is part of the regular coaching and feedback that should be provided in individual supervision sessions. The supervisee leads the interaction, and the supervisor takes on the responsibility of observing the supervisee's interaction with the client.

For new staff, observation by the supervisor should take place at least every month while the supervisee develops their skills and confidence; for more experienced supervisees, observation should take place at least every two months.

The supervisor and supervisee should decide together on appropriate cases for observation visits based on criteria such as a particularly challenging context/environment, new procedures or

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³⁰ https://ovcsupport.org/wp-content/uploads/2018/03/MGECW-Child-Protection-CMOM.pdf

sensitive cases; age of child; and child's vulnerability, safety and wellbeing according to the "do no harm" and "best interest of the child" principles.

3.3.1 Role of the supervisor in observation practice

The role of supervision in observation is to:

- Discuss the process with the supervisee so they feel confident about the exercise, allowing the supervisee to ask any questions and raise any concerns they have in advance.
- Schedule an observation with the supervisee in advance.
- Be familiar with the process, issue child's case file and any issues that may arise ahead of joining a meeting.
- Introduce the client to the supervisee.
- Ensure that consent/assent from the client has been obtained.
- Allow the supervisee to take the lead and do not interrupt the supervisee unless it is necessary.
- Explain that you will be taking notes about the supervisee's practice and let the child/caregiver/others see the notes if they are interested.
- Take notes referencing the observation tool, highlighting specific examples for areas of improvement or good practices that can be highlighted after the session.
- At the end of the session, have an individual supervision session with the supervisee to provide feedback from the observation.

3.3.2 Role of the supervisee during observation practice

The role of the supervisee during observation is to:

- Schedule interviews or meetings with a client with an appropriate case.
- Maintain the client's confidentiality by obtaining informed consent/assent when needed.
- Discuss with the client any risks or concerns that may arise from the observation.
- Introduce the client to the supervisor and remind them why the supervisor is joining the meeting.
- Lead the session with the client/s as though the supervisor is not present.
- Participate in an individual supervision session with the supervisor and share reflections/feelings about the observation.
- Ask any questions that may arise from this specific session or technical areas in which the supervisor can provide more guidance.

Note: Observation may include sessions at the administrative level, such as handling of partners, communications and facilitating meetings. During observation practice, the supervisor should take into consideration the following aspects of the supervisee and client.

Table 4: Aspects to Consider During Observation

Supervisee

- The attitude and behaviour of the supervisee.
- That available background information was gathered, and adjustments/considerations were made before the session.
- A clear objective/goal for the session/meeting was evident.
- The supervisee stayed calm and comforting throughout.
- The supervisee asked open-ended questions and used reframing and summarizing questions.
- The supervisee reflected on what was shared.
- Relevant and accurate information was provided.
- The supervisee avoided making promises or commitments.
- The supervisee summarized what happened during the session.

Child and caregiver

- A conducive and child-friendly location was selected for the interview.
- The purpose of the interaction was explained to the client simply and clearly.
- The child was provided with the choice to have someone else present.
- The supervisee obtained the child's and caregiver's informed consent/assent and explained the limits of confidentiality and mandatory reporting policies to the child and caregiver.
- Creative interview techniques (drawing, puppets, dolls, etc.) and child-friendly language were utilized.
- The supervisee asked open-ended questions and used reframing and summarizing questions.
- The supervisee checked in regularly with the child to ensure the child was being understood.
- The child was invited to express her/his own opinions and feelings throughout the session.
- The supervisee summarized what happened during the session with the child and thanked her/him for her/his participation.
- The supervisee agreed with the child and caregiver whenever possible and clearly stated what would happen next and when.

3.4. SOPs for shadowing

What: Shadowing is a common supervision practice for newly recruited supervisees or during the execution of new concepts, approaches or programs. It is used to demonstrate how to execute specific tasks and engage with clientele to achieve goals or certain targets.

Who: It is a face-to-face interaction between the supervisee and the supervisor. The supervisee in this context could be new to either a specific service, concept, approach or program.

Why: The goal of the exercise is for the supervisor or supervisee to demonstrate a specific task/assignment, or an interaction with a child to support the supervisee's practice and development, and the application of skills of the established procedure or policy.

How: During a shadowing visit, a senior supervisee or supervisor conducts certain/specific tasks or engages with a child as though the supervisee is not present. The supervisee is a neutral observer during this contact for learning and development. Only one supervisor should be invited to shadow a session so as not to overwhelm the child. However, two or three supervisees may attend a shadowing exercise in any case other than one involving a child.

Tool: The Shadowing Form (SS Form 4) should be used as a guide for supervisees while watching the supervisor execute the task.

It is recommended that the supervisor determines which task, or case, should be observed according to the plan to build the capacity of the supervisee. Supervisors should always consider the wellbeing of the supervisee.

It is recommended that three to five shadowing sessions occur once a new supervisee joins the organisation and when new concepts, approaches or programs are initiated. Reflections and discussions of shadowing sessions should occur in individual supervision sessions. It is also recommended that the supervisee does not interrupt the supervisor unless necessary. Monthly sessions should be held for the first three months for newly recruited personnel.

3.4.1 Role of the supervisor during shadowing practice

The role of the supervisor during shadow practice is to:

 Discuss the shadowing process with the supervisee so they understand the purpose of the exercise.

- Where the case involves a child, the role of the supervisor during shadowing practice should include, in addition to the above:
- Arranging a shadowing visit with an appropriate case and confirm that assent/informed consent was obtained with the child and caregiver.
- Introducing the child and caregiver to the supervisee and remind them why s/he is joining the session.
- Explaining that the supervisee might be taking notes about the supervisor's practice.
- Allow the supervisee to ask any questions and raise any concerns.
- Have an individual session with the supervisee at the end of the session for feedback.

Note. Some of the questions that the supervisor should ask include: "What did you observe during the session?" "What did you learn?" "What went well?" "What might you do differently?" "Do you have any questions, clarifications, etc.?"

3.4.2 Role of the supervisee in shadowing practice

The role of the supervisee in shadowing is to:

- Participate in the shadowing sessions.
- Plan and prepare with the supervisor on the task/process.
- Familiarize oneself with the child's case file ahead of joining a meeting in a session involving a child.

- Take notes referencing the shadowing tool to apply theory to practice.
- At the end of the session, the supervisee is to share reflections and observations from the shadowing session.
- Ask any questions that may arise from this specific session or technical areas in which the supervisor can provide more guidance.

3.5. SOPs for case file review

What: A case file review is a supervision practice used to assess a supervisee's application of case management competencies and record-keeping.

Who: The supervisor, jointly with the supervisee, should review at least 10% of the cases handled quarterly for each supervisee.

Why: The purpose is to meet administrative/accountability functions and identify any learning, developmental needs, gaps or barriers related to the process. This is part of regular coaching, and feedback should be provided in individual supervision sessions.

How: During a case file review, the supervisor verifies that the case is being managed properly and that documentation is accurate and complete throughout the steps of a case. It is also an opportunity for a supervisor to identify areas of development and support that might be useful for the growth of the supervisee.

Tool: The Case File Review Checklist Form (SS Form 5) should be used as a guide for supervisors to review case files. In addition, supervisors can refer to the Guidelines for Child Protection Case Management, Case Referral and Case Management for Reintegration of Children into Family or Community-Based Care or the Child Protection Practitioner's Guidebook.³¹

3.5.1 Role of the supervisor during case file review

The case files may be reviewed at any of the stages of the case management process. The process for case file review includes the following:

- The supervisor randomly selects case files, including closed-case files.
- The supervisor should review the cases independently and note any issues for feedback and review
- During an individual supervision session, the supervisor should provide feedback and follow up on the progress.

³¹ https://www.changingthewaywecare.org/wp-content/uploads/2023/03/7.11 CM-for-Reintegration-Package Child protection practitioners-Guidebook.pdf.

 The supervisor should also note trends across the team, such as common record-keeping mistakes or misunderstandings. The supervisor can address these observed trends during group supervision.

3.6. SOPs for case discussion

What: A case discussion is a supervision practice for in-depth discussion of a case to support a supervisee to reflect, analyse, explore potential options and determine the way forward.

Who: The supervisor reviews the status and progress of an identified case with the supervisee for discussion on challenges and solutions.

Why: Case discussions are used as a learning opportunity to reflect on how guiding principles and approaches, as well as skills, were applied and how difficult situations were managed in complex cases.

How: Case discussions can take place in an individual supervision or group supervision session. The supervisee presents background, concerns, challenges and status of the case. If a case is discussed in a group supervision setting, the supervisor must ensure the supervisee is prepared and comfortable sharing. Following the presentation, a discussion is opened, including questions, brainstorming options and agreeing upon next steps. Each case should be handled on its own merit, rather than a one-size-fits-all approach.

To maintain confidentiality, the discussion should occur in a conducive environment according to the "need to know" principle, and details related to the case should not be discussed externally.

Tool: Case Discussion Form (SS Form 6).

Note: It might also be helpful to refer to any relevant information that could be gathered and learned from the client on the Feedback Form. (Refer to the Case Management for Reintegration Toolkit.)

3.6.1 Role of the supervisor during case discussion

Using the case discussion tool as a guide, the supervisor should:

- Ensure there is a conducive environment for case discussions to take place and that the principle of confidentiality is upheld.
- Ensure that the supervisee is comfortable while presenting within the group.
- Take notes as the supervisee presents the case.
- Facilitate a collaborative dialogue with the supervisee(s).
- Follow the presentation by the supervisee and support the supervisee to reflect and analyze the case.

Note: The decisions/actions taken by the supervisee and discussions on potential options/actions should be emphasized.

3.6.2 Role of the supervisee during case discussion

The role of the supervisee during case discussion is to:

- Prepare the case for presentation, highlighting areas of concern and challenges.
- Reflect, analyse the case and explore potential options and actions that may be required.
- After completion of the session, update the case file accordingly.

3.7. SOPs for capacity assessment

What: A capacity assessment is a supervision practice used for supervisors to assess or examine a supervisee's knowledge, skills, and attitudes.

Who: The supervisor identifies the capacity of the supervisee to ensure the ability to perform the task. The results of the assessment should inform the capacity-building and development plan for the staff member to be addressed by the supervisor through individual and group supportive supervision sessions.

Why: The assessment outlines areas where further development and support are needed for the supervisee to perform effectively and thereafter, it allows the supervisor to recommend appropriate capacity development and support interventions.

How: The capacity assessment should be undertaken annually for existing and newly recruited staff. The aim is to assess the attitudes, knowledge and skills of the supervisee's capacity to undertake the tasks and assignments. The results of the capacity assessment should inform a capacity-building plan and areas of action to build the skills of the supervisee. It is recommended that the assessment should take two to three hours, broken down into three sessions.

Note: This process is both individual and collaborative. The supervisor will recognise the strengths of the supervisee while addressing their development needs through individual and group sessions. Additionally, capacity assessment at other supervision levels will evaluate managerial, administrative and supervisory skills in relation to available resources.

Tool: The Capacity Assessment Form (SS Form 7) should be used to assess the supervisee's knowledge, skills and attitudes.

3.7.1 Role of the supervisor

The following considerations should occur when planning for the capacity assessment:

- 1. Scheduling: Consider the appropriate time, venue and duration to carry out the assessment.
- 2. Resources: Tools and finances required.

Before the assessment, the supervisor should organise an extended individual supervision session in a conducive environment. The supervisor should prepare the supervisee, acquire the necessary tools and secure facilitation.

During the assessment:

- The supervisor should begin by describing the capacity assessment process to the supervisee.
- The supervisor should assure the supervisee that the assessment is a collaborative process designed to support efficient and effective service delivery. For example, they could say:

"This is a tool that has been developed with some of the key standards that are expected of a supervisee working with vulnerable children, families and communities, and those working on child protection. We don't expect you to be an expert and have perfect answers from the very beginning. It takes time to understand the principles and approaches and how to apply them in practice. During our first weeks together, this assessment will determine the areas where you may need more technical support. After the assessment, we will continue working together to build your knowledge and skills. After a few months, we will revisit the assessment to see how you are progressing."

After the assessment:

Once the assessment is complete, the supervisor and supervisee should discuss what the suggested priorities are for technical capacity building and development in each of the three areas.

- assessment to provide ongoing coaching to the supervisee. If several supervisees need guidance in the same area, the supervisor can organise a training or development session during group supervision.
- The supervisor should also arrange shadowing sessions for the supervisee to observe the application of guiding principles in practice (see SOP 4).

Some workforce challenges during emergencies include:

- Increased workload.
- Stress and trauma.
- Burnout.
- Safety and security concerns.
- Lack of technical capacity to handle the emergency.
- Inadequate resources—financial, technical.
- Poor coordination.
- Challenges in accessibility.
- Cultural incompetencies.

 After six months, the supervisor should reassess the supervisee to determine his/her progress and continuous development needs.

IV. CONSIDERATIONS FOR ALL SUPPORTIVE SUPERVISION PRACTICE

It is not mandatory to carry out all the activities mentioned above. However, everyone involved in various processes or stages of serving children in need of care and protection should assess which practices are suitable based on the specific context, staffing structure, capacities and the availability of supervisors and supervisees.

All supervision practices outlined in the SOPs are intended to be collaborative. Both supervisors and supervisees are responsible for preparing, engaging in the process and following up on the actions and decisions that have been agreed upon. Through the activities presented, supervisors continually engage in three key functions of supervision: administrative, developmental and supportive.

4.1. Considerations for supportive supervision in the context of emergencies

Kenya faces significant humanitarian challenges, including droughts, floods, food insecurity, disease outbreaks and displacement from climate and conflict. Insecurity and election-related violence exacerbate these issues. Child protection and social services are vital during emergencies, necessitating adaptive strategies to support vulnerable children and families. It is crucial for those working with children to recognise the increased safeguarding risks during these times. Preparedness and planning are essential in responding to growing needs, especially in remote, disaster-prone or insecure areas.

Having a care system that includes supportive supervision for the workforce is critical to supervisees' wellbeing. Supervisors should regularly check in with supervisees regarding their personal and family situations, reminding and supporting them in caseload management and self-care.

Supportive sessions should, therefore:

- Strive to relieve the work-related stress and traumas experienced by the supervisees occasioned by the emergencies.
- Provide opportunities for supervisors to closely observe how supervisees are coping.
- Mitigate the risk of burnout and secondary traumatisation by ensuring the workforce is supported
- Enhance the skills and knowledge of staff to provide child protection services in emergencies.

Note: Supervisors must be flexible and adapt their supportive supervision to meet changing needs. Both supervisors and supervisees should collaborate to maintain ethical standards, confidentiality and accountability during emergencies.

4.1.1 Role of supervisors

The role of supervisors during an emergency include:

 Provide supportive supervision, ensuring that supervisees can adjust well during emergencies.

- Inquire on supervisees wellbeing and self-care.
- If increased individual supervision is not possible, convert to virtual group supervision sessions to allow for increased frequency.
- Encourage peer-to-peer support using available virtual platforms.
- Discuss caseload management and categorize them as low-, medium- or high-risk cases.
- Discuss if the supervisee has the necessary resources to carry out their work, recognizing that supervisees may require increased resources (for example, more access to private transportation than usual to enable referrals, more airtime than usual to enable monitoring via phone, etc.).
- Note issues needing further support and escalate appropriately.
- Create an environment that allows for flexibility in administrative processes to avoid delays.

4.1.2 Role of supervisees

The role of supervisees during an emergency is to:

- Prepare, participate and document the proceedings of supportive supervision meetings and produce a report for the session.
- Inform supervisors of emergencies and disclose security, safety and wellbeing concerns.
- Give updates on the emergencies to the supervisor and respond to the issues.
- Adhere to personal safety and wellbeing processes as well as established emergency protocols.
- Implement the supervisor's guidance to ensure consistency and good practices are maintained during emergencies.

V. SCHEDULE FOR SUPPORTIVE SUPERVISION

Supervision in the SDCS will occur at multiple levels, including national, regional, county, sub-county, institutional and community. The proposed schedule for supervision is designed to assist supervisors in organising their team's supervision effectively. However, adjustments will need to be made based on the specific level, context and setting of the supervision.

- 1. Individual supervision sessions with the supervisee should occur at least once a month.
- 2. Group supervision sessions with supervisees should occur monthly at the national level and quarterly at regional and county levels, facilitated by the supervisor. At the sub-county, institutional and community levels, case conferencing can complement these sessions to address case management practices and discuss relevant issues.
- 3. For new supervisees, observation by the supervisor should take place at least every month, if the supervisee develops their skills and confidence, and at least every two months for more experienced supervisees.
- 4. Shadowing for newly recruited supervisees should take place weekly for the first three months. For complex cases of other supervisees, it should take place as needed.
- 5. Case file review is part of individual supervision; a supervisor should review 10% of the cases handled quarterly for each supervisee.
- Case discussions should occur during relevant times, such as decision-making, child
 movement or specific challenges. They must take place after case closure, especially if a
 Feedback Form is provided, using the information as a learning opportunity.
- 7. Capacity assessment should be done for all officers at least annually.

Table 5: Supervision Schedule

Supervision Practice	Tool	M	onth	1									
		1	2	3	4	5	6	7	8	9	10	11	12
Individual supervision session	Individual supervision meeting record	Х	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Х
Group supervision session	Group supervision meeting record	Х	Χ	Χ	Χ	Χ	X	X	Χ	Χ	Χ	X	Χ
Observation	Observation tool	Χ		Χ		Χ		Χ		Χ		Χ	
Shadowing	Supervision shadowing tool	Х	Χ	Χ									
Case file review (part of the individual supervision; review 3–6 case files)	Case file checklist	X	X	X	X	X	X	X	X	X	X	X	X
Case discussion (takes place during individual and group supervision)	Case discussion tool	Х	Х	Х	Х	Х	X	X	Х	Х	Х	Х	Х
Capacity assessment for all staff	Capacity assessment tool	Х											

Figure 2³² below illustrates the process of supervision of new supervisees to plan for supportive supervision and aid in supervisor understanding.

Figure 2: Process of Supportive Supervision



³² The Alliance for Child Protection in Humanitarian Action (2018): *Training package on supportive supervision*.

VI. TOOLS

List of Tools

SS Form 1: Individual Supervision Form

SS Form 2: Group Supervision Form

SS Form 3: Observation Form

SS Form 4: Shadowing Form

SS Form 5: The Case File Review Checklist Form

SS Form 6: Case Discussion Form

SS Form 7: Capacity Assessment Form

SS Form 1: Individual Supervision Form

Instructions: This form should be filled in by the supervisor during an individual supervision meeting. The form is used to record all that transpires between all relevant parties to ensure clarity of expectations and agreement on which areas require interventions to improve service delivery. This form should be kept by the supervisor and shared with the supervisee.

Name of supervisor:							
Name of supervise	Name of supervisee:						
Supervision session	Supervision session date:						
Supervision practices conducted:							
# Shadowing visits	# Observation visits	# Case files reviewed					

Agenda	Sample discussion questions	Notes based on the	Actions taken
		discussion	
Opening and check-in Review action points from the previous meeting and any challenges. Set and agree upon an agenda.	 How would you like to use this hour together? What do you feel would be most helpful or impactful for you to work on? Are there things that you need to talk about today? Are there any concerns, thoughts or experiences we may share in this session? Are there specific cases that you would like to review? How was the month for you? Are there issues that you would like to add to the agenda? 		
Administrative Review current caseload. If appropriate, use the Case Discussion Tool.	 Which cases have taken more of your time? Are there some that you feel have been solved satisfactorily? How many home visits have you been able to do? 		

Agenda	Sample discussion questions	Notes based on the	Actions taken
		discussion	
Access logistics, human resources and operations points that should be discussed.	 Have you noticed any gaps or duplications in roles that affect your work? How well do you think coordination is going with other departments or partner organisations? Are there barriers that affect timely and accurate reporting? What resources do you feel are currently lacking? What are the other challenges you are facing upon which you would like some feedback or guidance? 		
Development Attitudes Knowledge Communication Skills	 Are you able to apply child protection and case management knowledge/skills from training or coaching in your daily work? Are there work-related things that you would like to do better or get more information about? Are there any skills or information that you would like to work on? Are there areas where you feel you are growing professionally? 		
Supportive Check in with the supervisee. Explore possible selfcare strategies or support that may be needed.	 Are there any stressors at work that you'd like to discuss? Are you getting support from your colleagues? How do you manage the difficult information shared with you? 		

Agenda	Sample discussion questions	Notes based on the	Actions taken
		discussion	
■ Check safety, security and psychosocial well-being. Discuss emerging issues from supervision practices utilized in the past period	 Are there any red flags that may be an indication of potential burnout or needing extra support? Is there any impact on yourself or personal life related to specific, highrisk/complex cases? How do you manage stressful situations? What do you think about the observation or shadowing sessions, or the case files selected and reviewed? 	uiscussion	
 Use concrete and detailed (positive and constructive) feedback for the supervisee for this exercise. 			
Closing and action points Agree on the main action steps to be taken following the meeting and the time frame for accomplishing these tasks.	 Let's review the priority actions for the next month. Do you have anything else you would like to discuss? 		

Key issues noted by the supervisor		
Actions to be taken by the supervisor	Actions to be taken by the supervisee	
Supervisor signature	Supervisee signature	

SS Form 2: Group Supervision Form

to the team.

Instructions: This form should be filled in by the supervisor during the group supervision meetings. The sessions seek to address work-related challenges and dilemmas, reflect on practice, share experiences and solutions, learn from one another, and receive guidance and support from a supervisor.

and solutions learn from an another, and resolve guidance and support from a supervisor							
and solutions, learn from one another, and receive guidance and support from a supervisor. Supervisor name: Designation:							
	Supervisor contact:						
	Supervision Date: Venue:						
	Supervisees present: Designation:						
	enda	Notes from the discussion					
	elcome, opening and check-in	Trotes from the discussion					
•	Preliminaries (introduction, climate setting						
	and ground rules).						
•	The agenda is reviewed and agreed upon by						
	the team .						
•	Establish or briefly review meeting						
	"agreements," especially related to the						
	sharing of information.						
Ad	ministrative						
•	Supervisees share success stories for each						
	month.						
•	Supervisor shares reflections from the						
	previous meeting and provides updates						
	(e.g., logistics, reporting, recruitment, etc.).						
•	The supervisor invites supervisees to ask						
	questions or share if they are facing any						
	administrative or operational challenges in						
	their work.						
	pervisee check-in (each team member shares						
the	e following):						
•	Challenges that s/he has been experiencing.						
•	Number of active cases.						
•	High-risk/complex cases and some medium-						
	risk cases (pending cases, etc.).						
<u> </u>	Backlog cases.						
De	velopment						
•	Based on the capacity-building plans of the						
	supervisees, the supervisor can suggest						
	potential topics for a team learning event						
	(e.g., training, teach-back, guest speaker or						
	special events).						
	Supervisees should be asked to share any						
	learning opportunities they are aware of or						
	if they have a topic they wish to teach back						

 Supportive Track progress towards the goals; discuss if they were achieved or are still relevant. Supervisor or supervisees can propose team-building activities & address team wellness issues. 	
 Closing and action points Summary of the meeting, highlighting the action points and the expected timeframe for delivery. Schedule for the next meeting. 	
Actions to be taken by the supervisor Supervisor signature:	Actions to be taken by supervisees Supervisees signature:

SS Form 3: Observation Form

Instructions: This form should be filled in by the supervisor during the observation sessions. The form should then be filed by the supervisor after its completion. Note: During the session, the supervisors should fill in this form, making sure that concrete examples are noted.

supervisors should fill in this form, making sure that concrete examples are noted.						
Supervisor name: Designation:						
Supervisee contact: Date:						
Case number/Referencing Task:						
Areas of observation	Examples obs	erved and comments.				
PREPARATION						
Demonstrate proper planning						
and organisation for the						
session.						
INTRODUCTION						
Introduce the session						
appropriately to the child						
and/or caregiver.						
CONSENT: Confirm availability						
of assent/consent form.						
CONFIDENTIALITY						
Protect the child's and/or						
caregiver's confidentiality.						
COMMUNICATION						
Engage using child-friendly						
communication techniques						
that are age/developmentally						
appropriate, building rapport						
with the child.						
PARTICIPATION						
Promote the child's and/or						
caregiver's participation in the						
best interest of the child.						
SAFETY						
Assess the child's safety and						
other urgent needs.						
CLOSING						
Close the session						
appropriately.						
Actions to be taken by the supervisor		Actions to be taken by the supervisee				
Supervisor signature		Supervisee signature				

SS Form 4: Shadowing Form

Instructions: This form is meant to be used by the supervisee during the shadowing exercise. Shadowing offers the supervisee an opportunity to observe his/her supervisor perform a task related to their work. It allows the supervisee to explore specific challenging areas and to get a realistic picture of the task to better perform on their own, and areas to provide feedback or discussion after the shadowing exercise. The supervisee will use this form to note down what she/he has observed from the supervisor, the new skill areas they have observed, and to identify areas that need more support for skills development and competence. At any given point in time, ensure that the areas for shadowing are not more than three. Supervisor name: Designation: Contacts Supervisor name: Designation: Contacts Date Areas of observation/List the areas/s for shadowing (e.g., court, social inquiry, case planning, etc.) Areas of The supervisee is to note down what they observed from the observation/shadowing supervisor before, during and after engagement with the client. Note areas for further discussion and clarification. 1. Preparation 2. Introduction 3. Confidentiality 4. Communication 5. Participation 6. Safety 7. Closing Actions to be taken by the supervisor Actions to be taken by the supervisee Supervisor signature Supervisee signature

SS Form 5: The Case File Review Checklist Form

	Instructions: This tool should be utilized monthly to ensure case files are kept according to agreed-upon good practices. ³³					
Ch	ild number:	Date:				
Su	pervisee:	Superviso	r:			
Da	te of case files review:					
Ge	neral documentation	Y/N/NA	Comments/Recommendations			
1	Paper documentation for each child is stored in their file, clearly labelled with the individual identification code.					
2	Where applicable, each step in the case management process that occurred thus far has a corresponding form.					
3	All relevant sections of the forms are filled out completely and accurately.					
Ide	entification and registration	Y/N/NA	Comments/Recommendations			
		.,,				
1	A case record sheet for each case is filled out and filed. Details related to child/family strengths and needs, including case category and risk levels noted.		·			
2	and filed. Details related to child/family strengths and needs, including case category					
	and filed. Details related to child/family strengths and needs, including case category and risk levels noted. Informed consent/assent to collect, store and share information has been obtained from the child and caregiver, depending on the evolving					
3	and filed. Details related to child/family strengths and needs, including case category and risk levels noted. Informed consent/assent to collect, store and share information has been obtained from the child and caregiver, depending on the evolving capacity of the child. Copy of statutory and referral documentation	Y/N/NA	Comments/Recommendations			

³³ Additional guidance on appropriate case files is available within the SIMS Good Practices in Case Management Guidance document available here: https://www.ovcsupport.org/wp-content/uploads/2017/09/170S388-SIMS-case-management FINAL ONLINE.pdf.

	The second of th		
2	The practitioner identified and described the child protection concerns.		
3	The practitioner identified and described the strengths, needs and vulnerabilities of the child and the child's family.		
4	The assessment comprehensively described the needs and protective factors for the child/family.		
Cas	se planning	Y/N/NA	Comments/Recommendations
1	The case plan was completed within two weeks after the completion of the assessment.		
2	The actions within the case plan address the identified needs, risks and priorities.		
3	The actions within the case plan address the identified strengths, vulnerabilities and required actions that are needed to eventually reach the goals of reintegration.		
4	The case plan identifies the agreed-upon timeframes for actions to be taken and by whom.		
lm	plementation of the case plan	Y/N/N A	Comments/Recommendations
1	Direct services were provided by the case plan.		
2	Children and families were referred to appropriate, available services with the child/caregiver's informed consent/assent while maintaining confidentiality principles.		
3	Referrals were documented according to the prioritised actions in the case plan.		
Fol	low-up and review	Y/N/N A	Comments/Recommendations
1	Follow-up was conducted regularly according to the case plan.		
2	A review of the case plan was carried out at least once every three months with the child and caregiver.		Date of review

3	Based on the review, the case plan was adjusted accordingly.		
	nere applicable, Placement/reunification case	Y/N/N A	Comments/Recommendations
1	Appropriate placement forms are in the case file (e.g., Kafaalah, kinship, guardianship, supported independent living [SIL], supported child-headed household).		
2	Placement approval involved the child, family and appropriate authorities and was documented.		
3	A pre-placement/pre-reunification case plan review was undertaken and documented.		
4	The first follow-up visit was conducted immediately after reintegration/placement; four follow-up visits were planned with the child/caregiver and conducted within three months after the case closed.		
5	Post-reunification visits were conducted regularly according to the case plan.		
6	A case review was completed at or before six months from the reunification/placement date, including a review of the case plan and assessment against all benchmarks, clearly documented.		
7	If necessary, a case review was completed at 12, 18 and 24 months from reunification/placement date including a review of the case plan and assessment against all benchmarks, clearly documented.		Dates of subsequent case reviews
	Case closure	Y/N/N A	Comments/Recommendations
2	The reason for the closure is documented. The practitioner, child and caregiver discussed readiness and agreed to close the case.		Date of closure

3	If transfer is the reason for case closure, the appropriate steps and processes have been completed.		
4	Approval of the case closure by the supervisor/manager was documented.		
5	Approval of the case closure by the sub-county children's officer is documented.		
6	A feedback form was completed by the child and caregiver.		
Actions to be taken by the supervisor		Actions	to be taken by the supervisee
Supervisor signature		Supervis	ee signature

SS Form 6: Case Discussion Form

Instructions: This form should be filled in by the supervisor during case discussion(s). The case discussion is meant to support a supervisee to reflect, process, analyze, explore potential options and determine a way forward.

and	and determine a way forward.				
Nu	mber:	Date Case:			
Sup	pervisee:	Supervisor:			
Bac	kground information/family composition	Notes from the discussion			
:	Referral source and date.				
	Child's sex, age, nationality, language/s. Current residence/location.				
	Care arrangement (living with whom and				
	relationship).				
Cur	rent needs /protection concerns	Notes from the discussion			
- Cui	Describe the main protection issue in the case,	Notes from the discussion			
	including any specific abusive or violent incidents,				
	if applicable.				
	Are there immediate safety concerns? If yes, from				
	where/whom? Who can provide immediate				
	protection to the child (explore the network and				
	resources)?				
	How does the child view the situation?				
•	What are the roles and attitudes of				
	parents/caregivers? Are they supportive?				
	Motivated to collaborate toward a change? How is				
	their relationship with the child? Are				
	parents/caregivers or others in the household				
	implicated in the protection concerns?				
•	Is the child at risk of further abuse or violence?				
•	Are other children experiencing or at risk of				
	abuse?				
•	Does the child have other needs that make the				
	case a higher risk (e.g., disability, illness, family				
	separation, HIV)?				
•	What are the strengths or resources for the child,				
	both individually and within the environment?				
•	What do the different people involved, including				
	the child, see as possible ways forward?				
	ions taken/challenges	Notes from the discussion			
•	Briefly describe the work done on the case so far.				
	What referrels have been provided directly?				
•	What referrals have been made? Has the child				
	received those services?				
•	What have been some of the challenges (e.g.,				
Oro	concerns, referrals, interventions)?	Notes from the discussion			
Up	en discussion	Notes from the discussion			

Notes from the discussion
Notes from the discussion
Actions to be taken by the supervisee
Supervisee signature

SS Form 7: Capacity Assessment Form

Note: Examples of things to ask or look for in Parts A–C are included in Section 5.1 and Table 6 of the SOPs.

Instructions: This form should be filled in by the supervisor during the capacity assessment session/meeting. The form is used to assess the gaps of newly-recruited employees or when there is a new program being introduced.

Part A: Case management knowledge				
Knowledge questions	•	Child protection practitioner's response and discussion notes	Development priority	
Explain the Guiding case management.	Principles of			
Demonstrate how a should promote the of a child within case.	e best interests			
3. State the limits to on when working with	· ·			
Explain when and h protection practition obtain informed co	ow a child ner should			
5. State the steps of commanagement.	ase			
6. List some common for children.	signs of abuse			
7. Describe some key when developing a				
8. How can a child propagation practitioner empowers support children?				
9. Describe some of the influence children's separation and reir	experiences of			
10. Identify some of the children and familie reintegration.				
11. State some of the r household will wor education, health, safety, economic st psychosocial and co wellbeing, and rela attachment domain	k towards in the protection and ability, promunity tionship and			
12. Describe the main or closing a case.				

Act	tions to be taken by the supervisor	Actions to be tak	en by the supervisor
Su	pervisor signature	Child protection	practitioner's signature
Pai	rt B: Case management skills		
	lls questions	tection ner's Response ussion Notes	Development priority?
1.	Describe how a child protection practitioner should engage with a child during the registration/intake stage.		
2.	Explain how a child protection practitioner can help a child feel safe and encourage participation through verbal and non-verbal communication.		
3.	State some of the supportive statements children should hear from child protection practitioners throughout the case management process.		
4.	Explain some important choices children should be offered when talking about their experience.		
5.	Explain how case workers engage with children to understand their feelings and wishes.		
6.			
7.	State some important considerations when interviewing a child who has experienced abuse.		
8.	Describe how a child protection		

practitioner demonstrates

and their families.

empathy and respect to children

Actions to be taken by the supervisor					Actions to be taken by the child protection practitioner Signature of child protection practitioner			
Signature of supervisor								
Pa	rt C: Child protecti	on attitud	es					
Da	te	Child pro	tection p	ractitioner	er Supervisor			
Statements		Does the child protection practitioner Strongly Agree Disagree		Strongly	Case worker's response and	Development priority?		
		agree			disagree	discussion notes		
 2. 3. 4. 	Children have something to offer the community. Violence can be the child's fault. Residential care should be a last resort for long-term childcare arrangements. Children who experience traumatic events cannot recover or become							
5.	productive members of society. A child protection practitioner should always consider a child's opinion and wishes when making a							

decision that will affect him

or her.

Supervisor signature		Child prot	ection practitioner's si	gnature	
Actions to be taken by the supervisor		Actions to practition	be taken by the child per	protection	
	children.	 •	A		
	to have				
	not be allowed				
	with HIV should				
12	. People living				
	violence.				
	neglect and				
	at risk of abuse,				
	children more				
11	. HIV can put				
	problems.				
	mental health				
10	experience				
10	responsibility. Children do not				
	this is my				
	caregivers, and				
	their families or				
	separated from				
	abused or				
	care after being				
	support and				
	kindness,				
	deserve				
9.	Children				
	friend.				
	member or				
	close family				
	abused by a				
8.	Children can be				
	separation.				
	abuse or				
7.	the truth about				
7.					
	force to punish a child.				
	use physical				
	caregivers to				
	for parents or				
	C				

VII. ANNEXURE

To best understand the current level of knowledge and skills of a supervisee, Table 5 captures key areas that a supervisor should assess (see Capacity Assessment Tool). The supervisor should then use the results to help inform a professional development plan.

Table 6: Key Areas to Assess During the Supervisee Capacity Assessment

Considerations	Responses
1. What are some Guiding Principles of child protection and social work?	 Do no harm. Promote the child's best interests. Non-discrimination/treat every child fairly and equally. Adhere to professional ethical standards and practices/apply the public service commission code of conduct, among others. Seek informed consent and/or informed assent. Respect confidentiality. Ensure accountability/be responsible for actions and the result/s of those actions. Empower children and families to build upon their strengths. Base all actions on child development, child rights and child protection. Facilitate meaningful participation of children. Be culturally sensitive and/or responsive. Coordinate and collaborate with different stakeholders and service providers in child protection. Adhere to relevant child protection laws and policies.
2. How should a supervisee promote the best interests of a child?	 Ensure that all actions are taken to keep the child safe and promote their physical, emotional, social and cognitive development and wellbeing. Evaluate the positive and negative consequences of actions; consult with the supervisor on complex cases. Discuss options with the child and their caregivers (where appropriate and safe) when making decisions. Comply with existing policies, laws, guidelines and procedures. Keep up-to-date records and documentation, including the case management process.

Considerations	Responses
3. What are resilience and strengths-based approaches?	 Resilience is the ability to thrive in diversity or bounce back to become successful or otherwise develop positive ways to recover from stresses and shocks.
	 Resilience focuses on the positive aspects that help children cope and develop normally, or sometimes even do better, while living in difficult circumstances.
	 A strengths-based approach recognises that people can bounce back from trauma and crisis (i.e., they have resilience).
	 A strengths-based approach is based on the following principles and underlying assumptions: Every person has strengths and capacities, and people can change, using their strengths.
	If we only look at the problem, we may be blind to people's strengths.
	 A strengths-based approach reduces dependency—it uses the client's own strengths, so the client "owns" the outcome.
4. What can child protection staff do	 Facilitate the participation of children and vulnerable families in the case management process—having a say can provide strength.
to support the resilience of	 Explore capacity-building needs for the family.
vulnerable children and their families?	• Focus on children's and families' strengths and resources so that actions, interventions and possible solutions enhance these strengths.
	 Act with respect, care and empathy, which is likely to bolster self- respect and self-belief in children and families.
5. What is a life cycle/stage approach? Why is	 A child's developmental age and stage have a profound influence on the protection risks that they may be facing, and on their abilities to address these risks.
it important?	What child protection risks are present at the different stages of a child's life?
	Are there any specific risks for a child this age who is a girl? Or who is a boy?
	Are there any specific risks for a child in an emergency?
	Are there specific risks for special categories of children (e.g., children with disabilities, transgender, intersex, children living with HIV, children living with albinism)?
6. What are some	Policies and laws.
of the components	Regulations, standards and guidelines.

Considerations	Responses
of the child	 Preventive and responsive services.
protection system?	 Human resources—child protection.
	Participation—children and families.
	Coordination mechanisms.
	Financial resources.
	Monitoring and evaluation.
7. What are the	Mandatory reporting laws are in place.
limits to confidentiality when working with	 Prerequisite procedures, guidelines and mechanisms are in place and followed.
children?	■ Immediate/urgent need to protect a child's physical/emotional safety.
	The need to obtain parental consent if a young child presents for services (and there is no risk in doing so).
	The risk of harming oneself or another person.
8. When and how	When:
should a supervisee obtain	At the start of the session with the client/s.
informed consent/assent?	For referrals to other service providers.
consent, assent:	How:
	 Ensure the child and their caregiver fully understand the services being provided.
	 Ensure the child and their caregiver fully understand how the information collected will be used and stored.
	 Communicate in a child-friendly manner when gaining consent/assent from children.
	Encourage the child and his/her caregiver to ask questions about the process.
	Follow national laws on informed consent and assent.
	 Ask the caregiver and/or child (where appropriate) to sign the consent form and/or give verbal consent.
9. What is the continuum of services?	 Child protection services are provided on a continuum—prevention, early intervention, response, reintegration/rehabilitation.

Considerations	Responses
	Prevention and early intervention are far more effective than response.
10. What are preventive, responsive and promotive services?	 Rescue children from hostile environments, identify and commit children to safe places, and prepare children's welfare reports. Advocacy on children's services and child rights. Referral of children for further support services. Visit homes to conduct interviews/compile court reports Receive and record complaints on violations of children's rights. Collect data on child welfare matters. Receive reports on cases needing intervention.
	 Mediate cases in the best interest of the child. Submit progress reports to the courts. Reunify and reintegrate children. Identify potential beneficiaries for the orphans and vulnerable children (OVC) cash transfer, Nutrition Improvement through Cash and Health Education program (NICHE), Presidential Bursary Fund and other social protection. Receive and attend to complaints. Inspect Charitable Children's Institutions. Liaise with court users' committees and others for the protection of children.
	 Identify children with special needs and refer to services.
11. What are the steps of case management?	 Identification and registration. Assessment. Development of a case plan. Implementation of the case plan. Follow up and review. Case closure. Note: Case conferencing can happen during any of the above steps.

Considerations	Responses
12. What are some	 Develop within two weeks of the assessment.
key considerations when developing a	 Involve the child and caregiver (where appropriate) or a trusted adult.
case plan?	 Content of the case plan should reflect the individual assessment of the child/family.
	Set specific, time-bound actions outlining who is responsible for what.
13. What are some	A significant change in behavior.
of the common signs of abuse for	Nightmares.
children?	Problems in school (e.g., difficulty concentrating).
	 Withdrawing from friends and community activities.
	 Anger and aggression.
	 Thoughts of wanting to die; attempted suicide.
	Fear of particular people, places or activities.
	 Unexplained physical marks.
14. How can a child protection	 Assess the behaviours and conditions that contribute to the risk of child mistreatment and determine what is needed to make changes.
practitioner empower	 Identify the types of services available and how to access them.
caregivers to support children?	 Facilitate the family's or caregiver's investment in and commitment to the outcomes, goals and tasks outlined in the case plan.
	 Support parents to find ways of meeting their child's basic needs.
	 Assess resiliencies, strengths or resources in the family or household that will provide the foundation for change.
15. Describe some	Advanced age of the child.
of the factors that influence children's	■ Gender.
experiences of separation and	Caregiver's economic ability.
reintegration.	Disability (child).
	Reasons for separation.
	 Experiences during separation (e.g., ethnic discrimination); family's current situation.
16. How can a children's	Sit at the child's level.

Considerations	Responses
officer/case worker help a child feel safe and encourage participation through verbal and non-verbal communication?	 Utilize play therapy and creative interview techniques (drawing, puppets, dolls, etc.). Use simple language and words that the child uses. Stay calm and comforting throughout the interaction with the child. Ask open-ended questions. Use reframing and summarizing. Assure the child of his/her safety and protection by the law. Reflect on what the child shares. Check in regularly with the child to ensure the child is being understood accurately. Offer the child a chance to take breaks if they become visibly distressed.
17. What are supportive statements children should hear from the children's officer/case worker throughout the case management process?	 Thank you for sharing your story with me. You can take your time. This is not your fault. I am sorry to hear this happened to you. These are difficult things you are telling me; many may feel upset after a thing like that happens. You are strong and brave. I will try to help you.
18. What are some important choices children should be offered when talking about their experience/s?	 The choice to have a caregiver or trusted person in the room, if possible. The choice of where to have the conversation, if space allows. The choice to have a male or female child protection practitioner.
19. How can children's officers/child protection practitioners engage with children to understand their	 Pay close attention to what the child says and how s/he behaves. Draw pictures of faces that represent different feelings and ask the child which one is the closest to how s/he feels. Ask the child to draw a picture about what s/he is feeling in their mind and heart.

Considerations	Responses
feelings and wishes?	 Play games with the child to help her/him relax and feel comfortable telling her/his story. Ask open-ended questions in clear and simple language.
20. How should a children's officer/child protection practitioner respond if a caregiver becomes hostile or angry during an interview?	 Depending on the level of aggression: Remain composed and calm. Do not raise your voice. Attempt to calm the person down; try determining what is causing the anger and recognise their feelings. Give the person space and time to think. Be alert for possible aggression. Leave the situation if it feels unsafe. Carry a cell phone, whistle or personal alarm and use it if necessary. Conduct interviews with a colleague to mitigate risks.
21. What are some important considerations when interviewing a child who has experienced abuse?	 Do not push the child to speak about his/her experience. Tell the child s/he can take their time. Engage the child in friendly conversation instead of asking heavy questions that might re-traumatize the child (e.g., Can you tell me about your favourite game?). Tell the child that you are here to help. Use other culturally-appropriate resources.
22. How can a children's officer/child protection practitioner demonstrate empathy and respect to children and their families?	 Pay attention to verbal and nonverbal cues. Determine what is important to the child and family. Show a genuine desire to understand their situation. Keep an open mind. Create an environment of respect and acceptance. Listen for an acknowledgement of difficult feelings and encourage honest discussion of feelings.

VIII. USEFUL GUIDANCE AND REFERENCES

8.1. Policy and legislation

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8.3. Other useful documentation

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